



LOCAL SITE COORDINATOR DESIGNATION FORM

2009 FALL SEASON

This form is to be submitted to the FWRL by the Host Team—submission of form acknowledges that team shall adhere to the FWRL rules, policies and directives regarding hosting.

AGE GROUP: U- DIVISION: check one () Boys () Girls

GAME DATES:

FIELDS TO BE USED:

CITY WHERE FIELDS ARE LOCATED:

IS YOUR TEAM A MEMBER OF A CLUB? check one () yes () no

IF YES, NAME THE CLUB:

WEBSITE ADDRESS:

DOES THE WEBSITE PROVIDE DIRECTIONS TO FIELDS: check one () yes () no

The following individual is designated as our LOCAL SITE COORDINATOR

NAME:

ADDRESS:

CITY/STATE/ZIP:

E-MAIL ADDRESS:

HOME PHONE:

WORK PHONE:

CELL PHONE:

POSITION WITH TEAM:

Submitted by:

Relationship with team:

Please submit to:
FWRL Commissioner
4152 Dietz Farm Cir NW
Albuquerque, NM 87107
e-mail: fwrljt@aol.com
Fax: 505-830-2247